DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

	PATENT APPLICATI			
TTOPNE	CVET NO. 40004F00.4			

As a below named inv	entor, I he	reby declare t	nat: in are ac	stated below payt to	o my name:	
My residence/post offi	ce address	and Citizensi	ih aie as	Stated below hext to	o my name,	ototool finak oo
I believe I am the origioint inventor (if plura patent is sought on the	l names a	re listed belo	w) of th	e subject matter wh	d below) or an o nich is claimed a	and for which a
Low Profile Support Sy	stem For	Device Rack-N	/lounting			
the specification of wh						
(X) was filed on	Apr 24, 20 8 and wa	000 as US s amended on	Applica	tion Serial No. or PC	T International A blicable).	pplication
I hereby state that I including the claims, a disclose all information	as amende	d by any am	nendmeni	t(s) referred to abov	e. I acknowled	ed specification, Ige the duty to
Foreign Application(s) and/or	Claim of For	eign Priority				
hereby claim foreign priori nventor(s) certificate listed beling date before that of the	below and ha	ive also identified	d below an	es Code Section 119 of y foreign application for p	any foreign applicat patent or inventor(s)	ion(s) for patent or certificate having a
COUNTRY		APPLICATION NUM	ABER	DATE FILED	PRIORITY CLAIMED L	INDER 35 U.S.C. 119
□N/A					YES:	NO:
<u> </u>					YES:	NO:
revisional Application					L	
hereby claim the benefit upelow:	nder Title 35	i, United States	Code Sect	tion 119(e) of any United	d States provisional	application(s) listed
W	APPLIC	ATION SERIAL NUMB	ER	FILING DATE		
	N	/A		4		
LS. Priority Claim hereby claim the benefit und the subject matter of eac herided by the first paragrap	h of the claim h of Title 35	ns of this applic United States C	ation is no ode Section	ot disclosed in the prior U n 112. I acknowledge the	inited States applica duty to disclose mat	tion in the manner erial information as
elihed by the first paragrap elihed in Title 37, Code of Fo ational or PCT international f	ederal Regula filing date of 1	tions, Section 1. this application:	50(a) Write	n occurred between the m	mig date of the phot	application and the
		FILING DATE		STATUS (o	atented/pending/abandoned	,
APPLICATION SERIAL NUMB	ER	7,2,110 0,410		3171031		<u></u>
N/A						
OWER OF ATTORNEY: s a named inventor, I hereby se Patent and Trademark Off	appoint the	following attorne I therewith:	y(s) and/or	agent(s) to prosecute this	application and tran	sact all business in
Customer l	Number (22879		Place Customer Number Bar Code Label here] .	
Send Correspondence to:			-	Direct Telephone Cal	lis To:	
HEWLETT-PACKARD COM				Steven L Webb		
Intellectual Property Administration P.O. Box 272400						
Fort Collins, Colorado 80	528-9599			(970) 898-7745		
hereby declare that a nade on information an ne knowledge that will oth, under Section 100 copardize the validity o	nd belief a ful false st D1 of Title	re believed to atements and 18 of the Ur	o be true; I the like nited Stat	; and further that the so made are punisha tes Code and that su	ise statements was ble by fine or in	prisonment, or
ull Name of Inventor: Rob	ert W Luff	el		Citizenship: US		
esidence: <u>15</u>	ence: 1520 42nd Avenue Court Greeley CO 80634					
ductioe.						

7-13.00

Same as residence

Inventor's Signature





Full Name of # 2 joint inventor:	David P. Ionas	Citizenship: US			
	r: David P Jones Citizenship: US 466 Stratton Park Bellvue CO 80512				
Residence:	Same as residence				
Post Office Address:		0.1 13 2100			
Inventor's Signature	linus)	Date /3, 2000			
<i>(</i> .		7 0			
Full Name of # 3 joint inventor:	Curtis C. Ballard	Citizenship: US			
Residence:	12275 Weld County Road 74 Ea				
Post Office Address:	Same as residence				
Inst-PB	and	July 13 2000 Date /			
Inventor's Signature		Date /			
jul					
Fill Name of # 4 joint inventor:	Nicholas D Thayer	Citizenship: US			
Residence:	3320 W 7th Street #11 Greeley CO 86631 80631				
Post Office Address:	Same as residence				
Michelus W.	Theyer	"/13/ 2av			
Inventor's Signature		Date			
John John John John John John John John					
Fulf-Name of # 5 joint inventor:		Citizenship:			
Residence:					
Post Office Address: .		 			
Inventor's Signature		Date			
Full Name of # 6 joint inventor:		Citizenship:			
Residence:					
Post Office Address:					
Inventor's Signature		Date			
Full Name of # 7 Joint Income		Citizenship:			
Full Name of # 7 joint inventor:		Citizenship.			
Residence:					
Post Office Address:					
Inventor's Signature		Date			
Full Name of # 8 joint inventor:		Citizenship:			
Residence:					
Post Office Address:					
Fust Office Address:					
Inventor's Signature		Date			